



RURAL DISTRICT OF DROXFORD

ANNUAL REPORT

of the

MEDICAL OFFICER of HEALTH

and

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1965



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DROXFORD RURAL DISTRICT COUNCIL

Chairman: G. Hall, Esq.,

PUBLIC HEALTH COMMITTEE 1965/66

Chairman: Mrs. F.H. Seaward

Vice-Chairman: Comdr. H.H.L. Dickson

Mrs. E.D. Crofton
Mr. E.F. de C. Dutton
Mr. G. Hall
Miss R.C. May
Dr. J. Perry-Walker

Capt F.H. Powys Maurice
Mr. N.C. Street
Mr. R.V.J.A. Swindale
Mr. W.A.G. Warwick
Mr. P.H. Weeks

HEALTH DEPARTMENT STAFF 1965

Medical Officer of Health : S. Chalmers Parry, M.A., Cantab,
M.R.C.S., L.R.C.P., D.P.H.
(Retired 23rd April, 1965)

A.G. Farr, M.B.E., M.A., M.B.,
B.Chir., D.P.H., D.T.M. & H.,
D.I.H.
(Commenced 24th April, 1965)

Engineer and Surveyor : F. Lindley, A.M.I.S.E.,
(Retired 31st March, 1966)

W.J. Denley, C. Eng., A.M.I.Mun.E.
(Commenced 1st April, 1966)

Chief Public Health Inspector : F. Lindley, A.M.I.S.E.,
(Retired 31st March, 1966)

H.L. Wenden, Cert. S.I.B., M.P.H.I.A.
(Commenced 1st April, 1966)

Additional Public Health Inspector : L.N. Craddock, Cert. S.I.B., A.R.S.H.,
M.P.H.I.A.

Clerk : Miss J. Brown

DROXFORD RURAL DISTRICT COUNCIL

Northbrook House,
Bishop's Waltham,
Southampton.

Tele: Bishop's Waltham: 2241.

To the Chairman and Members
of the Droxford Rural District Council.

Sir,

I have the honour to present my Annual Report for 1965 together with that of the Surveyor and Chief Public Health Inspector. It will be found that a separate section has been devoted to providing information about various services which are available to the public and legislation which became effective during the year, and it is hoped that this may be of value. Suggestions regarding additional information to be included in future reports will be welcomed.

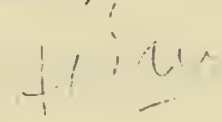
During 1965 the Council decided upon certain alterations to Northbrook House which will provide additional office accommodation for the public health department, and it is hoped that this extra space will become available in 1966. It will provide a welcome relief from the overcrowded and unsatisfactory conditions.

I should like to express my gratitude to Dr. M. Crowley, Medical Officer of Health Fareham for standing in for me for the period when I was unable to take up my appointment for reasons of ill-health. I am most grateful for the welcome and the ready assistance I have received since commencing my duties, from you, Sir, from Councillors and in particular from the Chairman and Members of the Public Health Committee, as well as from doctors, health visitors, nurses, members of voluntary organisations and many others. The support and help which I have received from members of the Department and from the Clerk and officers of the Council is recorded with gratitude.

I have the honour to be

Sir,

Your obedient servant,



Medical Officer of Health.

GENERAL REPORT OF THE MEDICAL OFFICER OF HEALTH

Staff and Organisation

Dr. S. Chalmers Parry retired from the post of Medical Officer of Health on April 23rd, 1965. He was appointed on the 8th September, 1947 and served the Council for $17\frac{1}{2}$ years. During this period there was considerable development in the District and in the work and responsibilities undertaken by the Council.

He was succeeded by Dr. A.G. Farr, who was prevented by illness from taking up his appointment immediately, and actually commenced duty on the 1st July, 1965. During the intervening period of some ten weeks Dr. M. Crowley, Medical Officer of Health of Fareham kindly stood in as and where required.

Towards the end of the year consideration was given to the planning of the Department having regard to the expected move into different offices in 1966. At the end of the year Mr. F. Lindley tendered his resignation as Engineer, Surveyor and Chief Public Health Inspector, to take effect from the 31st March, 1966, and in January, 1966 the Council decided to separate the post of Engineer and Surveyor from that of Chief Public Health Inspector. Mr. H.L. Wendon was promoted to the latter post with effect from the 1st April, 1966.

During Mr. Lindley's term of office the Engineer's and Health Departments had been run as a single administrative unit; with the increase in work in both fields this had disadvantages, and during 1966 we shall be setting up a separate office organisation for the Health Department.

Towards the end of 1965 two pupil Health Inspectors were attached to the department; they were Chief Petty Officers G. Catlin and S. Atkins, both serving in the Royal Navy but undertaking the four year training course as Health Inspectors which they will complete in 1966. They have been able to give valuable assistance in the department, particularly in conjunction with the Offices, Shops and Railway Premises Act inspections as well as in many other ways.

In the autumn of 1965 the Highbury Technical College, Portsmouth, started a course of instruction on "day release" lines for pupil Health Inspectors. There is a national shortage of between 500 and 600 trained Health Inspectors and it is to be hoped that this course will continue and grow.

Whilst it is hardly worthwhile for the smaller local authorities to consider employing pupil Health Inspectors nevertheless there is a wide field in which pupils can gain useful experience with an authority such as Droxford, and our policy should be to continue to welcome the attachment of pupils to the department.

Droxford Rural District

The district lies in the south-east of Hampshire, bounded on the south by the expanding urban areas of Havant and Waterloo, Portsmouth, Fareham and Southampton, and the greater part of the population resides in the southern half of the district. There is no large town in the District, but Bishop's Waltham, Denmead and Wickham are towns with between 2,000 and 3,000 inhabitants. In the northern part the population is more sparse and scattered. This northern part is largely composed of chalk downland, being the western extremity of the South Downs, and is mainly given over to large agricultural units comprising both arable and stock farming. In the south the soil is mainly clay and sand and the holdings are smaller with much market gardening.

Much of the district is of great scenic beauty, and building development is controlled either by proposed "Green Belt" restrictions or by being scheduled as of outstanding natural beauty. There are no major industrial undertakings within the District, agriculture in its various forms (and including timber) being the main source of occupation. In the south in particular many of the residents are employed in the neighbouring towns and cities.

The District is included in the special study now being undertaken by Professor Colin Buchanan for the local authorities in the area, consequent upon the publication of the "South East Study" which postulated certain major developments in the area, the most important of which was the development of a major city between Portsmouth and Southampton. Should such development take place - and the need for it appears convincing - it will profoundly affect the southern half of the district. The work of the Local Government Boundary Commission in this area was suspended early in 1966 following the appointment of a Royal Commission to advise on the future of Local Government. There is inevitably doubt at the present time as to the lines future development will take, and this makes the planning of matters such as sewage disposal systems difficult until the likely requirements are known.

DROXFORD RURAL DISTRICT

	<u>1965</u>	<u>1964</u>
Area in acres	62,845	62,848 ⁵
"Home Population - mid year	24,590	24,140.
Number of hereditaments (31/3).....	8,117	7,903.
Rateable Value (31/3).....	£27,400.0.0.	£693,812.0.0.
Sum represented by a penny rate (31/3).....	£2921.12s.2d	£2,660.9s.4d.
General Rate	8/7d.	8/3d.

ENVIRONMENTAL HYGIENE

Sewage Disposal

This remains the greatest health problem and is the major cause of complaints received by the department. Construction of the Swanmore and Waltham Chase extensions to the Bishop's Waltham system commenced during 1965 and good progress was maintained despite the high rainfall experienced. The new system should come into use in 1966. Planning of the Denmead system was completed and submitted to the Ministry of Housing and Local Government for approval during the year, and a local investigation was held early in 1966. In much of the south of the District the subsoil is impervious, so that individual septic tank systems are unsatisfactory as the effluent cannot be suitably disposed of. The Council maintains a fleet of 6 tankers for the emptying of cesspits, and provides 4 free emptyings annually for ratepayers. The cost of this service being £20,062.0s.0d per annum.

During the year extension of the Southwick sewage purification plant was commenced, assistance towards the cost of this is being made by the Ministry of Defence in conjunction with the rebuilding of a naval establishment in the village.

There still remain several areas in which there has been considerable development in the last few years, both by new construction and by the improvement of old houses, many through improvement grants, and thus the number of water carriage sewage systems has increased greatly. As previously mentioned, until a decision is reached concerning future development in these areas it is impractical to plan for sewage disposal systems to serve them. In the event of an outbreak of disease from sewage pollution the control measures would necessitate the emptying of all cesspits in the affected area at frequent intervals, which would inevitably curtail the service to other parts of the District.

One noticeable result of the sewerage of Wickham and Bishop's Waltham has been an improvement in the cleanliness of the River Meon and of the River of the Lord - though in fact the latter stream had almost ceased to flow as a result of the connection of dwellings to the sewers and perhaps as a result of the Portsmouth Water Company's pumping station.

Housing

During 1965 the Council's housing project at Wickham approached completion and the first houses were occupied. Plans for an estate of similar size for Bishop's Waltham were completed and work will begin on this early in 1966. There remain numbers of dilapidated or unsuitable buildings in different parts of the District. The gradual replacement of shack buildings in the Curbridge area with new houses in permanent materials has progressed, and the water main was extended in the Springles Lane and Curbridge area, 24 dwellings connected. There have been demolitions in Bishop's Waltham but the failure of those responsible to complete the work rapidly and to leave a clean site has been a cause of concern. Some progress has been made in the construction of the new road system through the town. Details of housing inspections and action taken, will be found in the Chief Public Health Inspector's Report.

Although not strictly a housing matter it should be recorded that the County Council undertook considerable work in Wickham Square to improve traffic flow and parking arrangements, and improvements on the A. 32 at Corhampton and Droxford were undertaken.

DROXFORD RURAL DISTRICT

HOUSING 1965

Type of Property	Occupied at 31.12.1964.	Completed during 1965	Total
Council owned houses	859	79	938
Council owned elderly persons bungalows	191	6	197
Private, all types	-	110	-

Refuse Disposal

A weekly refuse collection in all parishes was instituted in 1965 and was maintained throughout the year. This is thought to have had a beneficial effect in reducing the degree of fly infestation, although the cold, wet summer was not conducive to a high rate of fly breeding.

FOOD HYGIENE

Milk

Routine sampling of milk is carried out; these are of products as delivered to the consumer; there are no processing dairies in the district and no sampling of bulk raw milk is done. A sample taken at a Gosport dairy proved positive for brucellosis (undulant fever in the human, contagious abortion in cattle) and was traced back to a farm. By taking individual milk samples we were eventually able to trace one infected cow in the herd. There is no effective cure for this disease in the adult animal, though vaccination of the young animal gives a high degree of protection. As there is no compensation payable for the slaughter of infected cows it is impossible to eradicate the disease in cattle. Fortunately pasteurisation of infected milk is wholly effective in destroying brucella so that milk from infected cattle can be allowed for human consumption providing it is pasteurised. In view of the prevalence of this infection in dairy herds in Britain and the protracted and unpleasant nature of the illness in man many people feel that the sale of raw milk should be stopped.

Water

Portsmouth Water Company set up their own laboratory during the year and a monthly report on the tests carried out on their water sources and supplies is received. Southampton Corporation likewise control the quality of water supplied through their water undertaking, which supplies a small part of the District, and so we do not take routine samples of mains water. Bacteriological sampling of private water supplies is undertaken with the assistance of the Winchester Public Health Laboratory which also handles the majority of bacteriological investigations undertaken by the department. We are most grateful for the help and advice given by the Director and staff of this laboratory during this year as in other years, and this gratitude is also extended to their colleagues at Portsmouth Public Health laboratory to whom specimens from the south-east corner of the district are submitted from time to time.

Premises selling food or providing meals are inspected periodically. Where complaints are made as to adulteration contamination or other unsatisfactory matters in regard to food the case is discussed with the Weights and Measures Department of the County Council, and such action as is required is undertaken in conjunction with them.

In the case of a complaint arising from the staining of a canned meat product, the manufacturer's Chief Chemist attended a meeting held at Northbrook House attended by Mr. Preston, Chief Weights and Measures Officer, Hampshire County Council and officers of this Council. It was clear that the staining was not harmful to health, and that it arose from difficulties associated with the coating of the inside of the can along the seam. The manufacturer had experienced considerable difficulty in getting a suitable tin for the product. Stocks of the product were held by only one retailer, who declined the offer to return stocks to the manufacturer. No further complaints have since been received.

PERSONAL HEALTH SERVICES

Negotiations regarding the future of the family doctor service continued at national level throughout the year. Whatever the outcome, it is apparent that over the next ten or fifteen years there will be a serious shortage of general practitioners. There seems to be no doubt that the family doctor service will only be able to continue if the doctors are given more help in the nursing and secretarial fields and confine themselves to diagnosis and treatment.

In Hampshire a start was made in this direction some years ago with the attachment of nurse/midwives and health visitors to specific practices, rather than dealing with all patients within an area. Attachments had been made to several practices in the district, and more were made in 1965.

The District Health Sub-Committee which is concerned with personal health services met four times during 1965. Mrs. F.M. Seaward is Chairman of this Committee, which has representatives of the erstwhile local Nursing Associations, the District Council and other bodies sitting on it.

CHILD WELFARE CLINICS 1965

Clinic	Number attending born in			Total children	Total Attendance
	1965	1964	1960-63		
Bishop's Waltham	29	26	13	68	558
Denmead	42	27	28	97	365
Droxford	8	15	14	37	179
Durley	8	11	5	24	177
Hambleton	16	27	3	46	185
Meonstoke	7	12	10	29	158
Southwick	24	9	5	38	112
Swanmore	20	40	6	66	391
Upham	7	5	3	15	138
Waltham Chase	32	44	24	100	946
West Meon	7	15	13	35	177
Wickham	51	73	20	144	615

The operation of so many clinics in this small rural district is possible largely because of the assistance given at each clinic by the voluntary workers, many of whom have been doing this service for many years. Their invaluable help is acknowledged with gratitude.

During 1965, six Nurse/Midwives working mainly in the area of Droxford Rural District attended 183 confinements and made 4,648 general visits.

The areas covered by individual nurses and health visitors do not fit into the district boundaries, and so it is not possible to give more detailed statistics of the work done.

The only hospital in the area is the large psychiatric hospital at Knowle; there are two residential homes for the elderly provided by the local authority and there are several private homes for old persons. General and special hospital facilities are easily accessible from all parts of the District at Winchester, Southampton and Portsmouth.

Child Welfare Clinics are held regularly at the main centres; a complete list is provided in the directory section of this report. General practitioners make their own arrangements about ante-natal clinics; relaxation classes may be arranged where there is need.

The Home Help and Good Neighbour services are operated through the Supervisor for the area which includes Droxford Rural District, whose office is at Petersfield.

HOME HELP SERVICE

Applications received	102
Cases Completed	155
Staff:-	
Home Help.....	22
Good Neighbours.....	4
Not requiring help	36
Advance bookings at 31.12.65	11

Types of cases assisted:-

Aged sick and infirm	62
Maternity	23
Chronic sickness	6
Post Hospital	5
Emergency sickness	3
Child care	1
Special	1

Total hours used 24,629 equivalent to 11 whole time workers.

<u>Payments:-</u>	Full cost , , , , , , ,	24
	Scale	17
	Minimum	60

Average weekly case load 47

Mental Health services for the district are based on the Fareham office of the County mental welfare organisation. The object of this service is to support and assist cases of mental illness living at home and to enable them to lead a normal existence.

The organisation of this service is not based upon local district areas, and the following figures apply to Petersfield Urban and Rural Districts as well as to Droxford. They do give some indication of the work involved, however.

<u>Visits to Patients</u>		<u>Visits to other persons and services</u>	
Regarding admission to hospital	272	Regarding admission	195
To the mentally ill	1024	To the mentally ill	244
To subnormal and severly subnormal	1039	To subnormal and severly subnormal	217
	_____		_____
Total:-	2335	Total:-	656
	_____		_____

Certain hospital-based services are provided in the District. Mobile mass X-ray units visit the larger centres of population usually on a two-yearly programme, the Southampton centre covers roughly the western half of the District and Portsmouth the eastern half. Each centre is open at specific times during the week for members of the public to have a miniature chest X-ray taken on request.

Voluntary Services

A great part of "home care" of the ill or infirm is provided by voluntary effort. In most cases this comes from relations, friends or neighbours. There are parish organisations, such as clubs for the elderly, church organisations, British Legion, and the local branches of National organisations such as Red Cross, Women's Voluntary Services and other bodies. Often the voluntary bodies work in conjunction with state services - for example "Meals on Wheels" is financed jointly by the County and District Councils but is organised and operated entirely by the W.V.S. This service was started in certain parishes during 1965, was expanded during the year and it is hoped will eventually be available in all parishes in the District.

It provides a hot midday meal on two days a week to people who are housebound and have difficulty in getting help with shopping or with cooking. In general it is elderly people who are provided for by this service, but it is available to all who come within the definition. Names of possible recipients are sent to the Welfare Officer who arranges for a home visit to ascertain the circumstances. Recipients pay a fixed sum towards the cost of the service, the balance of the cost being shared between county and district councils

As well as the nutritive value of the meal there is the psychological value of a visit from friends, and this is what the ladies who do the distribution soon become. And as friends they will be aware of any change in health or circumstances which should be reported.

It will be realised that the organisation and operation of a service of this nature requires much hard work, and that this service started in the district is largely due to the work of Mrs. K. Blake, W.V.S. Meals on Wheels organiser for the District. She has been well supported by her helpers and thanks are also due to Knowle Hospital, Fairthorne Manor (Y.M.C.A. canoeing and camping centre) and Durley School for the cooking and supply of meals. The latter "filled the breach" at an early stage, but relying upon school kitchens means the service has to stop in the holidays.

One difficulty in extending to the northern part of the district is to find another catering centre; another is the lack of helpers. Normally distribution on a "meal round" is done by a driver and her helper. A mileage allowance is paid. Helpers are needed, particularly in the Soberton area and anyone who would be prepared to help, either with or without transport, is asked to contact Mrs. MacDonald, telephone Wickham: 2203.

Where it is thought that any particular person should receive Meals on Wheels, the name and address can be submitted to the Welfare Officer direct (address and telephone number in the directory section of this report) or to the Public Health Department of the Rural District Council offices.

The Red Cross is concerned with welfare of a more directly medical character and also acts as the agency for the supply of home nursing appliances provided through the County Council

Towards the end of the year the Chairman of the Rural District Council summoned a public meeting with the object of coordinating the efforts of the various voluntary agencies in the welfare field and at a second meeting steps were taken to set up a committee for this purpose which were accepted in 1966.

This Committee will in no way interfere with the work of the many agencies in this field, but they will know of the resources available to both voluntary and public organisations and which is best equipped to cope with a particular problem.

VITAL STATISTICS

It will be understood that rates must be derived from a sufficient number of observations to be comparable, and that in this respect some of the observations recorded in these statistics are too few in number to be of significance.

BIRTHS

The total of live births recorded (464) showed a slight increase over 1964, but the number of illegitimate births showed a definite reduction to a number similar to that recorded in years other than 1964. Illegitimate births were 4.9% of all live births in the district in 1965.

The crude birth rate was 18.8 and when corrected for age and sex this becomes 20.5. The population of the district is estimated to have increased by 450 during 1965.

There is nothing which could cause concern in this figure, unless it is the steady increase in population coupled with the high birth rate which will increase the numbers attending school and - in longer term - the demand for housing.

BIRTHS

YEAR		1961	1962	1963	1964	1965
POPULATION DROXFORD RURAL DISTRICT		22,760	23,300	23,790	24,140	24,590
LIVE BIRTHS (Legitimate)	Male	186	192	184	206	213
	Female	165	183	177	216	228
	Total	351	375	361	422	441
LIVE BIRTHS (Illegitimate)	Male	11	12	8	14	8
	Female	8	8	15	20	15
	Total	19	20	23	34	23
TOTAL LIVE BIRTHS		370	395	384	456	464
BIRTH RATES - Live births/1000 population	Crude Rate	16.2	16.9	16.1	18.9	18.8
	Corrected Rate				20.6	20.5
	England and Wales	17.4	18.0	18.2	18.4	18.1
ILLEGITIMATE LIVE BIRTHS per cent total live births		5.1%	5.1%	5.9%	7.4%	4.9%
STILL BIRTHS	Legitimate	5	6	2	5	4
	Illegitimate	0	0	0	0	1
	Total	5	6	2	5	5
STILL BIRTH RATE per 1000 births (live & still)		15.9	14.9	5.2	10.8	10.6
TOTAL:- Live and Still Births		375	401	386	461	469

MATERNAL AND INFANT DEATHS

There has been steady reduction in the deaths caused by childbirth and in infants over the past 60 years; these results have not been achieved without effort which has to be continued. It is a pleasure to report that there was again no maternal death in the district in 1965; the overall rate is now so low that we should expect an occurrence only about once in every ten years.

The reduction in infant mortality lagged behind the maternal position but since the mid 1940's there has been further improvement. The figures to follow show a satisfactory situation in this respect.

RATES

Infant Mortality

Deaths under one year per 1000 live births:-

Droxford Rural District	10.7
England & Wales	19.0
Legitimate Infant deaths per 1000 legitimate live births ...	11.3
Illegitimate Infant deaths per 1000 illegitimate live births. --	

Neo-Natal Mortality

Neo-Natal Mortality rate 6.4.
Deaths under 4 weeks per 1000 total live births:-
England and Wales 13.0.

Early Neo-Natal Mortality

Deaths under 1 week per 1000 total live births 4.3.

Perinatal Mortality

Stillbirths and deaths under 1 week per 1000 total live
and still births.....14.3

INFANT DEATHS

Infant Mortality

(Deaths of children under 1 year of age)

INFANT MORTALITY	1961			1962			1963			1964			1965		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Legitimate	3	0	3	3	3	6	3	4	7	2	4	6	3	2	5
Illegitimate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	3	0	3	3	3	6	3	4	7	2	4	6	3	2	5

Neo-Natal Mortality

(Deaths of infants under 4 weeks of age)

NEO-NATAL MORTALITY	1961			1962			1963			1964			1965		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Legitimate										-	2	2	2	1	3
Illegitimate										-	-	-	-	-	-
TOTAL										-	2	2	2	1	3

Maternal Deaths

	1961	1962	1963	1964	1965
Deaths from pregnancy childbirth and abortion	0	0	0	0	0
Maternal Mortality rate Droxford Rural District	-	-	-	-	-
Maternal Mortality rate England and Wales	0.33	0.34	0.27	0.25	0.25

CAUSES OF DEATH 1965

No.	Cause of Death	Total all ages		Under 4 weeks		Four Weeks-		one year		5-	
		M	F	M	F	M	F	M	F	M	F
1.	Tuberculosis, Respiratory	-	1								
2.	Tuberculosis, other	-	-								
3.	Syphilitic disease	-	-								
4.	Diphtheria	-	-								
5.	Whooping cough	-	-								
6.	Meningococcal infection	-	-								
7.	Acute poliomyelitis	-	-								
8.	Measles	-	-								
9.	Other infective and parasitic diseases	-	-								
10.	Malignant neoplasm, stomach	6	4								
11.	" " , lung, bronchus	11	2								
12.	" " , breast	-	8								
13.	" " , uterus	-	5								
14.	Other malignant and lymphatic neoplasms	14	14								
15.	Leukaemia, aleukaemia	1	2								
16.	Diabetes	-	-								
17.	Vascular lesions of brain ("Stroke")	23	45								
18.	Coronary disease, angina	41	23								
19.	Hypertension with heart disease	-	5								
20.	Other heart disease	23	44							1	
21.	Other circulatory disease	5	4								
22.	Influenza	-	1			1					
23.	Pneumonia	16	21			1					
24.	Bronchitis	7	5								
25.	Other diseases or the respiratory system	2	1								
26.	Ulcer of stomach and duodenum	4	-								
27.	Gastritis, enteritis and diarrhoea	-	-								
28.	Nephritis and nephrosis	-	-								
29.	Hyperplasia of prostate	1	-								
30.	Pregnancy, childbirth and abortion	-	-								
31.	Congenital malformations	-	-								
32.	Other defined and ill defined diseases	11	13	2	1						
33.	Motor vehicle accidents	2	-								
34.	All other accidents	3	8				1				1
35.	Suicide	2	1								
36.	Homicide and operations of war	1	2							1	1
Total:-		173	209	2	1	1	1	-	-	2	2

15-		25-		35-		45-		55-		65-		75+	
M	F	M	F	M	F	M	F	M	F	M	F	M	F
						1							
						1	-	1	1	1	1	3	2
				1	-	3	-	3	1	4	1		
						1		2		3		2	
				1				1		1		2	
						1		4	1	6	6	4	6
		1										1	1
				1		1		2	3	7	12	13	29
				2		2		6	4	14	13	17	6
						1				1		3	
								3	1	4	9	15	34
								1		2	1	2	3
										1			
								3		3	6	9	15
						2		1		2	2	2	3
												2	1
										1		3	
												1	
				1				4	2	3	1	2	8
		1				1							
		1				1				3		1	3
	1					2							
				1									
-	1	2	1	3	4	13	4	28	16	47	61	75	118

DEATHS 1965

Total Deaths 382
Crude death rate (deaths per 1000 population):-
Droxford Rural District 15.5.
Corrected death rate:- Droxford Rural District 9.6.
Death rate:- England and Wales 11.5.

Causes of death tabulated by age and sex are shown in the table on pages 12 and 13. More deaths were recorded than in 1964 but when the crude death rate is corrected for variations in the age and sex distribution from that for the country as a whole, it is rather lower than the national figure.

193 deaths occurred in persons aged 75 or over - that is just over half - and 20 deaths were in persons aged 44 or younger, that is 5% of all deaths.

The principal cause of death are set out in the following table:-

Principal Causes of Death, Droxford R.D. - 1965

Disease	Male	Female	Total	No. aged 75+
Cancer:- Stomach	6	4	10	5
Lung	11	2	13	-
Breast	-	8	8	2
uterus	-	5	5	2
other forms	14	14	28	10
Total all cancer:-	31	33	64	19
Stroke	23	45	68	42
Coronary Heart Disease	41	23	64	23

"Stroke", coronary heart disease and cancer account for 196 deaths, or just over half of all deaths; almost the same number died from each disease, but it will be noted that coronary heart disease is twice as common in men, and more deaths occur under 75, and. Whereas the reverse is true of "stroke". Cancer deaths were evenly distributed among the two sexes but only one third of all cancer deaths were over 75 years of age.

This pattern conforms to that experienced by the country as a whole; there were two more deaths from lung cancer than in 1964. The proportion of deaths from this disease remains below the national average, but the numbers are too small to make valid comparisons.

Cancer Prevention

During 1965 considerable publicity was given to the screening of women to detect pre-cancerous changes in the lining of the uterus. It will be seen that 5 deaths were due to this form of cancer, whereas 8 were due to cancer of the breast: in England and Wales deaths from breast cancer are about $2\frac{1}{2}$ times more numerous than those from uterine cancer, and yet the breasts are more easily examined than almost any other part of the body.

The fear of developing cancer is common to most people; unhappily in some this leads to the assumption that all cancer is inevitably fatal and painful; known cases are discussed in hushed voices and "not before the children". The result is that many people avoid seeking medical advice in the early stages, when cure is possible.

Cancer is now one of the major causes of death, yet methods of treatment are continually improving and in one form at least (cancer of the prostate), cure is to be expected in most cases. It may well be many years before certain cures for other forms become available, but many more cures are possible with present methods if people will only seek medical advice at an early stage.

Thus an early reduction in cancer deaths could be achieved by overcoming this fear; the death of Richard Dimbleby resulted in much beneficial publicity on cancer, including a television programme in 1966, and it is to be hoped that this may go some way towards educating the public to the realities of the cancer situation.

It will be seen that cancer of the lung is the most common form of this disease in Droxford as it is in the country as a whole, and it is well known that smoking, particularly of cigarettes, is a factor in the causation of this disease. During 1965 the advertisement of cigarettes on television was prohibited.

INFECTIOUS AND NOTIFIABLE DISEASES DROXFORD R.D. 1965

DISEASE	No. of Cases
Scarlet Fever	5
Whooping Cough	8
Measles	513
Dysentery	1
Tuberculosis	3
Erysipelas	1
Paratyphoid Fever	1

The official notifications of disease are always fewer than the actual number of cases. From the table on page 15 it will be seen that 1965 was a "measles year". No outbreak of bacillary dysentery or food poisoning was notified during 1965, but this does not mean that these conditions are rare. However it can be taken to indicate that institutions and organisations catering for numbers of people are aware of the need for care in regard to hygiene, as it can be assumed that any outbreak of intestinal infection in a number of people would be brought to our knowledge.

It is relevant here to mention that at times there is a reluctance on the part of people employed in the preparation and serving of food to have specimen examined bacteriologically. This is a very short-sighted attitude, as it is reassuring to the individual to be given a clean bill of health, whereas should they be found to be carrying an infection which could be transmitted to others they would surely prefer this to be treated and the risk of endangering others to be removed. By no means all people concerned with food are aware of the need to report any intestinal illness or any sores on the hands, arms or other exposed parts. Such things should always be reported to the person in charge, and the Public Health Department staff will always be pleased to advise in any particular case. It is better to be safe than sorry!

TUBERCULOSIS 1965

	Respiratory			Non-Respiratory		
	M	F	Total	M	F	Total
Number on Register 31.12.64.	118	77	195	29	40	69
Additions in 1965						
Fresh infections	2	1	3	1	1	2
Inward Transfers	3	-	3	-	-	-
Removals -						
Persons cured	6	6	12	-	2	2
Persons transferred out	2	3	5	-	-	-
Deaths	2	1	3	-	-	-
Case notified but not confirmed	-	1	1	-	-	-
Number on Register 31.12.65.	113	67	180	30	39	69

It will be seen that 12 cases were removed from the register as cured during the year, and that the number on the register was further reduced by 15 during the year. There was nothing remarkable about the 3 fresh infections reported during 1965 and there was no indication of any focus of infection developing from an undiagnosed case.

B.C.G. Vaccination

This is offered to pupils at secondary schools following the "Heaf" skin test to show if the boy or girl has an immunity to tuberculosis or not. In those susceptible to infection the vaccine is offered in order to give them an immunity to this disease.

Animal Diseases transmitted to man

One case of Weil's disease occurred during 1965. This is an infection found in rats, cattle and other animals, and is a serious illness with an appreciable fatality rate. The patient, a farmworker, made a good recovery. After considerable efforts one rat was trapped at the place of employment; it proved not to be infected. A thorough treatment was done of all premises in the village likely to be harbouring rats. After consultation with the veterinary staff of the Ministry of Agriculture it was decided not to examine the cattle in this case as this would have involved a great amount of field and laboratory time and effort, and there was also the possibility of becoming involved in legal proceedings. No further case has occurred.

IMMUNISATION

During the autumn term parents of children born in 1957 and 1960 attending the 14 infant and primary schools in the district were advised by circular distributed through the schools of the advisability of having reinforcing doses of diphtheria/tetanus vaccine. This was done with the consent of local doctors, and immunisation clinics were arranged at each school at which single "boosting" doses were given. Where more than one dose was needed or where parents preferred they consulted their family doctor, to whom the relevant forms were sent. Local doctors also cooperated in doing certain of the school clinics in their own areas. As a result of the help given by school staffs, doctors and school nurses the programme was successfully completed.

SCHOOL IMMUNISATION PROGRAMME 1965

Diphtheria/Tetanus

No. of schools circulated	14	
No. of forms returned	458	
No. of children fully protected	60	13%
No. not previously immunised	31	7%
No. refusing immunisation	48	10%
No. to attend family doctor	104	23%
No. immunised at school clinics	215	47%

The effect of this has been to increase the number of children being immunised or given reinforcing doses during 1965, and although the school programme did not include poliomyelitis immunisations, it may have indirectly had something to do with the increase also noticed in this form of immunisation.

DIPHTHERIA, TETANUS, WHOOPING COUGH IMMUNISATION

Year of Birth	Total Live Births	Diphtheria				Whooping Cough				Tetanus			
		Primary		Booster		Primary		Booster		Primary		Booster	
		1965	1964	1965	1964	1965	1964	1965	1964	1965	1964	1965	1964
1965	464	142	-	-	-	142	-	-	-	142	-	-	-
1964	456	209	100	8	-	209	100	8	-	209	100	8	-
1963	384	16	191	14	5	16	190	13	4	16	191	14	5
1962	395	4	21	20	9	4	21	17	9	4	21	20	9
1958/61	-	5	5	214	6	4	5	69	6	5	5	214	6
Others	-	3	10	202	134	3	8	19	74	3	10	202	133
Total:-		379	327	458	154	378	324	126	93	379	327	458	153

Of the 456 children born in 1964, 309 had been immunised against diphtheria, whooping cough and tetanus by the end of 1965. This represents 61%, and is an improvement over the 53.9% recorded last year for children born in 1963. But at this rate the level is below what is desirable. The numbers receiving reinforcing doses of vaccine trebled.

POLIOMYELITIS IMMUNISATION

Year of Birth	Total Live Births	Primary		Booster	
		1965	1964	1965	1964
1965	464	45	-	-	-
1964	456	267	25	1	-
1963	384	56	150	11	6
1962	395	24	33	16	9
1958/61	-	30	17	319	95
Others under 16 years	-	5	16	44	65
Total:-		427	241	391	175

64% of all children born in 1964 had been immunised against poliomyelitis by the end of 1965; the corresponding proportion for children born in 1963 at the end of 1964 represents 53% of total live births. More children are being immunised against poliomyelitis than against diphtheria, whooping cough and tetanus, and this may be due to the ease of administering and the lack of reaction with the oral vaccine. The "boosting" doses rather more than doubled over those for previous year.

SMALLPOX IMMUNISATION

Year of birth	Total Live Births	Primary		Re-vaccination	
		1965	1964	1965	1964
1965	464	29	-	-	-
1964	456	144	38	-	-
1958/63	-	85	153	6	16
1949/57	-	11	9	21	66
Total:-		269	200	27	82

By the end of 1965, 39.8% of children born in 1963 had been vaccinated against smallpox. This proportion is much lower than for other immunisation rates and is largely due to the fact that vaccination is recommended to be done in the second year of life, whereas most children cease to attend clinics regularly after the age of 12 months.

By the time the child is of school age one is not inclined to advise smallpox vaccination because of the risk of a severe reaction at this age. Recent outbreaks of smallpox have shown how common people susceptible to smallpox are in the population of Britain, and a much higher vaccination rate is desirable.

INTERNATIONAL CERTIFICATES OF IMMUNISATION

By international agreement, travellers arriving from countries declared to be infected may be required to produce valid international certificates (which must be on the prescribed form) against any of the following diseases:-

Smallpox:- Certificate valid for 3 years, effective 8 days after successful primary vaccination, immediately upon re-vaccination.

Cholera:- Certificate valid for 6 months; effective from date of second injection for primary immunisation. Where reinforcing dose given within period of efficacy of previous immunity one reinforcing dose only required.

Both vaccines can be given by general practitioners but advance arrangements should be made in order that vaccine can be ordered.

Both these certificates require the doctor's signature to be authenticated by the Medical Officer of Health to whom they should be sent for this purpose.

Yellow Fever:- Available only at certain specified centres, of which the nearest is Southampton Health Centre, by appointment, Wednesday afternoons. Telephone: Southampton 28721 - fee one guinea.

People travelling abroad are advised to have in their possession valid international Certificates of Smallpox immunisation. Cholera and Yellow Fever immunisation is needed only for travel to certain tropical countries and advice should be sought from the carrier.

Immunisation against Typhoid Fever is not obligatory; it is strongly advised however if travelling to certain European and other countries where the incidence of typhoid and paratyphoid fever is very much greater than in Britain.

Finally, leave plenty of time to get all these procedures carried out - at least one month is necessary.

Legislation 1965

Offices, Shops and Railway Premises Act, 1963

The Information for Employees Regulations, 1965: Date of commencement, 1st June, 1965. Copy of Abstract of the Act to be posted at premises or information by giving employees copies of an explanatory booklet prepared under the auspices of the Ministry of Labour.

Food and Drugs Act, 1955

Composition and Labelling. The Dried Milk Regulations, 1965, date of commencement: Regulations (1)-(8) 10th March, 1965, remainder 11th March, 1965. Prescribes fat content (minimum and maximum percentages), maximum moisture content and labelling of containers.

Public Health Act, 1961

The Building Regulations, 1965. Date of operation, 1st February, 1966. The Regulations take the place of the building byelaws made by individual local authorities.

Public Health Act, 1936

The Rag Flock and Other Filling Materials Regulations, 1965, date of commencement, 2nd August, 1965. Amends previous legislation by a technical alteration on the process of testing for cleanliness of woolen flock and other woolen materials, the proportion of animal fibre in filling materials (for grading purposes), and a revision of the list of analysts prescribed for testing purposes.

The Rent Act, 1965

Date of Commencement, 8th December, 1965. re: Security of Tenure and fair rents. The appointment of Rent Officers and the setting up of rent assessment committees.

DIRECTORY

This section is intended as a reference to various services connected with health and welfare matters. Suggestions for items to be included in future reports would be welcomed.

HOSPITAL SERVICES

AMBULANCE AND HOSPITAL CAR SERVICE

8 a.m. to 6 p.m. Mondays to Fridays,
8 a.m. to 12 noon Saturdays,
Apply Supt. Highlands Road, Fareham
Tele: Titchfield - 3434.
Other times including Public Holidays
Apply Central Control Tele: Winchester -
61644.

HOSPITAL AND ALLIED SERVICES

There are no General Hospitals in Droxford Rural District, but the following hospitals serve the area:-

SOUTHAMPTON

Royal South Hants Hospital - Tele: 26211.
Southampton General Hospital
- Tele: 75522.
Southampton Chest Hospital - Tele: 71042.
Children's Hospital, Southampton
- Tele: 71012.

PORTSMOUTH

Royal Portsmouth Hospital - Tele: 22281.
St. Mary's Hospital Portsmouth
- Tele: 22331.

WINCHESTER

Royal Hampshire County Hospital
- Tele: 5151.

SPECIAL HOSPITALS

INFECTIOUS DISEASES

Priorsdean I.D. Hospital -
Milton Road, Portsmouth. - Tele: 22331.
Victoria Isolation Hospital,
Morn Hill, Winchester. - Tele: 2048.
Chest Hospital, Southampton
- Tele: 71042.

SMALLPOX

Weyhill Hospital, Andover - Tele: 61644.
(Central Control, Winchester for special
ambulance arrangements)
Smallpox Consultant for the Area -
Dr. J.R. Salmon - Tele: Southampton 56602.

MENTAL

Knowle Hospital situated in Wickham
Parish - Tele: Wickham 2271.

CHEST CLINICS (Persons suffering from Tuberculosis)

PLACE	ADDRESS AND PHYSICIAN I/C	DAYS AND TIMES
EASTLEIGH	The Mount Hospital, Bishop'stoke. Tele: Eastleigh 2335 Dr. D.C. Lillie.	Mon 2.0.p.m. - 4.0.p.m. Thurs 9.0.a.m. to 12 Noon. (Both days and times for all patients)
HAVANT	Queen Alexandra Hospital, Coshan, Portsmouth. Tele: Coshan 79451. Ext:114 Dr. J.P. Sharp	Mons 9.30.a.m. Old Patients 1.30.p.m. " " Weds 2.00.p.m. Skin Testing Thurs 2.00.p.m. " "
WINCHESTER	Royal Hampshire County Hospital. Tele: Winchester 5151 Ext:347. Dr. D.C. Lillie. Consultant Physician:- Dr. G.G. Arblaster.	Weds and Thurs 9.00.a.m. to 12.30.p.m. (Both days for all patients)

MASS RADIOGRAPHY UNITS

Southampton Mass Radiography Unit, 7, Archer's Road, Southampton. Tele: Southampton 26549	Medical Director - Dr. F.R. Moore.
Portsmouth Mass Radiography Unit, St. Mary's Hospital, Milton Road, Portsmouth. Tele: Portsmouth 26664.	Medical Director - Dr. J.D. Lendrun.

VENEREAL DISEASES

Treatment is available at the following clinics:-

PLACE	MALES	FEMALES
PORTSMOUTH St. Mary's Hospital	9.30 a.m. - 12 Noon) Tues & 4.30 p.m. - 7.p.m.) Thurs 9.30 a.m. - 12 Noon Sats.	4.30 p.m. - 7 p.m. Mons 2.00 p.m. - 4 p.m.) Weds 4.30 p.m. - 6.30 p.m.) 9.30 a.m. - 12 Noon Frids
SOUTHAMPTON 44, Bullar Street (Males) 46, Bullar Street (Opp. Chest Clinic) (Females)	9.00 a.m. - 12 Noon Mon- Sat. 5.00 p.m. - 7.00 p.m. Mon - Fri.	12 Noon - 1.00 p.m. Mons. 2.00 p.m. - 7.00p.m. Tues. 3.00 p.m. - 7.00p.m. Thurs. 2.00 p.m. - 4.00 p.m. Frids.
WINCHESTER The Royal Hampshire County Hospital. Out-Patient's Annexe.	10.30.a.m. - 12 Noon - Sats.	2.00 p.m. - 4.00 p.m. Mons.

PUBLIC HEALTH LABORATORY SERVICE

WINCHESTER P.H. Laboratory,
Royal Hampshire County Hospital,
Winchester. Tele: 3807.

Director - Dr. M.H. Hughes.

Chief Technician - Mr. A.G. Dick.

PORTSMOUTH P.H. Laboratory,
Milton, Portsmouth. Tele: 22331.

Direction - Dr. D.J.H. Payne.

Chief Technician - Mr. Quaife.

Both laboratories undertake bacteriology and virology , and are also distribution centres for vaccine lymph. For details of collection of specimens, etc., it is advisable to consult the laboratory in each case.

PUBLIC ANALYST

Spetchley, Cobden Avenue, Bitterne Park,
Southampton. Tele: 55826.

DISTRICT NURSING, MIDWIFERY AND HEALTH VISITING SERVICES

Where a nurse or health visitor is shown attached to a practice she normally deals with patients of that practice only. Application for nursing service should normally be made through the family doctor, but in an emergency any nurse will give advice or treatment.

The names and addresses shown below were correct as at mid 1966, but are liable to change. In case of doubt or difficulty, consult the Council Offices.

DN - District Nurse.

M - Midwife.

HV - Health Visitor.

Area	Service	Name and Address
Attached full time to Drs. Kinnear and Moore.	DN/M	Mrs. M.S. Wills, "Hillboro", Hoads Hill, Wickham, Fareham. Tele: Wickham 2277.
Southwick: attached part time to Drs. Kinnear and Moore.	DN/M	Mrs. R. Buckman, 58, Wykeham Field, Wickham, Fareham. Tele: Wickham 2105.
Denmead, Hambledon, World's End, Potwell, Purbrook Heath: Attached part time to Drs. Horn, Purvis and Ruthven-Stuart.	DN/M	Miss J. Dupont, 2, Bere Road, Denmead, Portsmouth. Tele: Hambledon 649.
Bishop's Waltham, Upham, Durley, Curdridge, Curbridge, and unattached work in Botley. Also attached part time to Drs. Henning, Steel and Saywood.	DN/M	VACANT
Swanmore and Waltham Chase. Also part time attached to Drs. Henning, Steel and Saywood.	DN/M	Mrs. B.S.A. Watkins, "Pendower", New Road, Swanmore. Bishop's Waltham 2837.
Droxford, Soberton, Southwick, Chidden and unattached work in Corhampton and Meonstoke.	DN/M	Miss A.H. Hobbs, 20, The Park, Droxford. Tele: Droxford 244.
West Meon, Warnford: attached to the practice of Dr. Creedy-Smith.	DN/M/ HV	Miss E. May, 16, Glenthorne Meadows, East Meon, Petersfield. Tele: East Meon 263.

DISTRICT NURSING, MIDWIFERY AND HEALTH VISITING SERVICES - Cont'd

Area	Service	Name and Address
Bishop's Waltham, Shedfield, Swannore, Upham. Also attached part time to Drs. Henning, Steel and Saywood.	H.V.	Miss B.M. Watson, The White House, Swannore, Southampton. Tele: Bishop's Waltham 2607
Attached to practice of Drs. Kinnear and Moore, Wickham, also covers Hambledon, Southwick for unattached work.	H.V.	Miss B.G.M. Osborn, 3, Craneswater Avenue, Southsea, Portsmouth. Tele: Portsmouth 31155.
Unattached work in Horndean, East and West Meon, Warnford, Clanfield and Denmead.	H.V.	Mrs. A. Coomber, 142, Catherington Lane, Catherington, Horndean. Tele: Horndean 2343.
Hedge End, Bursledon and unattached work in Botley, Curdridge, Curbridge and Shedfield.	H.V.	Mrs. G. Evans, 20, Belmont Road, Chandlersford, Eastleigh. Tele: Chandlersford 4516.

AREA NURSING OFFICER Miss K.M. Dell,
The Town Hall, Petersfield. Tele: Petersfield 3383.

COUNTY NURSING OFFICER

Miss Maughan,
(Office) - The Castle, Winchester.
(Private)- Beausot,
Lainston Close,
Winchester.

VACCINES

Diphtheria, Whooping Cough, Tetanus (Combined) and Poliomyelitis vaccines are supplied to doctors by the County Health Department and stocks are kept at Northbrook House.

CHILD WELFARE CLINICS

Centre	Hall	Afternoons @ 2.00 p.m.
Bishop's Waltham	The Institute	1st and 3rd Fridays
Denmead	Memorial Hall, Main St,	4th Monday
Droxford	Community Hall	1st Monday
Durley	Memorial Hall	2nd Friday
Hambledon	Village Hall	2nd Monday
Meonstoke	The Meon Hut	1st Tuesday
Southwick	Manor Hall	4th Friday
Swanmore	Parish Hall	3rd Thursday
Uphan	Village Hall	3rd Monday
Waltham Chase	Chase Hut	2nd and 4th Wednesdays
West Meon	Village Hall	2nd Monday
Wickham	Victory Hall	1st and 3rd Wednesdays

The following five Centres, situate in adjoining districts, are available for children living near the boundaries of the district:-

Centre	Hall	Afternoons at 2.00 p.m. (unless otherwise stated)
East Meon	Institute Hall	1st and 3rd Thursdays
Fair Oak	Women's Hall	2nd and 4th Thursdays
Park Gate	British Legion Hall	Every Thursday
Purbrook	Deverell Hall	1st, 3rd and 5th Wednesday 10.00 a.m. - 12 Noon 2nd and 4th Wednesdays 2.00 p.m. - 4.00 p.m.
Titchfield	Parish Hall	1st and 3rd Mondays

SCHOOL HEALTH SERVICES

The Health Department is responsible for the hygiene of schools in the District; where there is cause for concern for any reason telephone and seek advice. The School Medical Officer is responsible for the medical inspection of the children and advise regarding matters of personal health, and is also able to advice on hygiene generally when at the school.

Specific remedial clinics may be arranged by the school health service for the following specialities:-

Child Guidance
Educational psychology
Ear, Nose and Throat

Orthopaedic
Ophthalmic

Routine vision tests are conducted by the school nurses, also audiometry where indicated.

DENTAL SERVICE

The School Dental Service is also available for the treatment of expectant mothers. For expectant and nursing mothers and children of pre-school and school age only, consultations by appointment Only. Please telephone between 9 a.m. and 9.15 a.m. as follows:-

PLACE	ADDRESS	TELEPHONE
EASTLEIGH	Dental Clinic, Chamberlayne Road,	Eastleigh: 2498
FAREHAM	County Health Clinic, The Assembly Hall, off West Street,	Fareham: 2603
PETERSFIELD	County Health Clinic, Love Lane,	Petersfield: 3020
PORTCHESTER	The Manor House School,	Coshan: 76441
WINCHESTER	4, The Square,	Winchester: 3347

THE ELDERLY

County Geriatric Officer Dr. Van Landenberg. Tele: Winchester 4803.

Old Peoples Homes

Warden and Matron: Mr. and Mrs. E.J. Dunmore,
Corhampton House, Corhampton. Tele: Droxford 420.

Matron: Mrs. M.M. Kirby,
Kitnock's House, Curdridge. Tele: Botley 2553.

Welfare Officer

Mr. J. Cattnach - The Assembly Buildings, Off West Street,
Fareham. Tele: Fareham 4481/2.

Parish Welfare Organisations

Parish	Organiser
<u>Bishop's Waltham:</u> Merry & Bright Club.	Mrs. E.C. Caines, Hoemare, Hoe Road, Bishop's Waltham
<u>Upham:</u> Eventide Club.	Mr. A.J. Parsonson, Danescot, Victoria Road, Bishop's Waltham
<u>Denmead:</u> Silver Ribbon Club.	Mrs. M.A. Suter, Andover, Hambleton Road, Denmead.

Parish Welfare Organisations - Cont'd

Parish	Organiser
<u>Soberton:</u> Golden Age Club. British Red Cross Society	Mrs. Adams, Gen Dermott, Droxford. Mrs. Hockley, Eldersfield, Station Road, Soberton.
<u>Newtown, Soberton:</u> British Red Cross Society.	Mrs. Hindson, Forest Lodge Farm, Newtown, Fareham.
<u>Durley:</u> Darby & Joan Club. British Red Cross Society.	Mrs. Waldron, Rose Cottage, Heathen Street, Botley. Mrs. Stevens, Green Pastures, Wintershill, Durley.
<u>Shedfield:</u> The Welcome Club, Waltham Chase The Friendship Club, Shedfield	Mr. P.C. Cull, Holmleigh, Winchester Road, Waltham Chase. Mrs. E. Randall, Yew Tree Cottage, Shirrell Heath.
<u>Swannore:</u> The Twilight Club. British Red Cross Society. St. John Ambulance Brigade.	Mrs. E.D. Crofton, Club Leader, The Willows, Spring Lane, Swannore. Mrs. Castlenan-Brown, Seckford House, Chapel Lane, Swannore. Mrs. Linter, Waverley, New Road, Swannore.
<u>Curdridge:</u> The Friendship Club.	Miss E.E. Elcock, 42, St. Peters Close, Curdridge

Hone Help Service

Application for this service should be made to the Hone Help Divisional Supervisor, Mrs. A. Gray, The Town Hall Annexe, Petersfield. The office is open Monday to Friday, 9.a.m. to 12 Noon, but messages may be left at The Town Hall up to 5.30.p.m. Monday to Friday. (Tele: Petersfield 3383).

Mental Welfare Officer

Mr. G.W. Richardson, 21, Quay Street, Fareham. Tele: Fareham 2810.

British Red Cross Society

Local Director - Mrs. R.J. Castleman-Brown,
Seckford House, Chapel Road, Swanmore.

Women's Voluntary Service

Mrs. G. MacDonald, Webbs Land Farm, Wickham.

National Assistance Board

Fareham House, East Street, Fareham.

Citizen's Advice Bureau

Eastleigh -	12, High Street, Eastleigh.
Fareham -	Council Offices, Westbury Manor, Fareham.
Petersfield -	Town Hall Annexe, Petersfield.
Portsmouth -	59, Russell Street, Portsmouth.
Southampton -	3, Havelock Road, Southampton.
Winchester -	78, High Street, Winchester.

Family Planning Association Clinics

Family Planning Association Clinics are shown on the table below. A lady doctor and sister are in attendance. It is desirable that, on first attending, the patient should bring a note from her own doctor.

AREA	ADDRESS OF CLINIC	DAY	TIME
Cosham	Child Welfare Clinic, Northern Rd,	Weds.	1.30 - 3.30.p.m.
Eastleigh	The Red House, 6, Romsey Road,	Frids.	1.30 - 3.30.p.m.
Fareham	County Health Clinic, Assembly Hall, West Street,	Mons. Tues.	5.0-7.0.p.m. 6.0-7.0.p.m. New patients by appointment
Gosport.	War Memorial Hospital, Casualty Dept, Bury Road,	Tues. Thurs.	6.0-7.0.p.m. 6.0-7.30.p.m.
Portsmouth	Trafalgar Place, Clive Road, Fratton.	Tues. Frids.	1.30.-3.30.p.m. 6.0. -8.0.p.m.
Winchester	98, Sussex Street,	Tues.	2.0-4.0.p.m.
Havant	County Council Health Clinic, Parkway.	Thurs.	6.0-8.0.p.m.

THE REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

SANITARY CONDITIONS OF THE AREA

Water Supply

Piped supplies throughout the District are provided by the Portsmouth Water Company, the Southampton Corporation and two private estates. Regular reports of bacteriological examinations are received from the Portsmouth Water Company indicating that the samples are of excellent quality.

Details of supply are as follows:-

Portsmouth Water Company

<u>Parish</u>	<u>Dwellings</u>	<u>Population</u>
Bishop's Waltham	1045	3536
Boarhunt	99	349
Corhampton and Meonstoke	164	579
Denmead	929	3030
Droxford	161	550
Durley (part)	87	315
Exton	40	142
Hambledon	265	932
Shedfield	583	2046
Soberton	375	1342
Southwick and Widley	143	491
Swanmore	509	1801
Upham	158	550
West Meon	162	549
Wickham (part)	595	1870

Southampton Corporation Water Undertaking

<u>Parish</u>	<u>Dwellings</u>	<u>Population</u>
Curdridge	353	1412
Durley (part)	171	684
Wickham (part)	24	96

Sewerage and Drainage

Bishop's Waltham

23 properties were connected during the year making the total connected to 31st December, 1965 1044. The quantity of cess-liquor treated was less than for the previous year due to the disruptions at the works whilst alterations and extensions were taking place. The total gallonage of liquor treated was 2,044,400 for the year 1965, a monthly average of 170,366 gallons.

Wickham

95 properties were connected during the year. The quantity of cess-liquor treated rose to a monthly average of 210,200 gallons, the total treated over the year 1965 being 2,522,400 gallons.

Swanmore and Waltham Chase

The works of sewerage and the extension of the Sewage Disposal Works continued during the year and at the time of going into print in mid 1966, the sewers are on the point of being taken over and being put into use in both Swanmore and Waltham Chase.

Denmead

Considerable difficulty continued to be experienced in this area due to lack of main drainage, but when writing this report it is encouraging to realise that the Ministry has now agreed the scheme for the village in principle and that tenders have been invited. It is hoped that my report for 1966 will announce the commencement of the work.

Public Cleansing

The Cesspool emptying scheme provides for four free emptyings per year. Although there has been a small increase in the annual total of emptyings the saturation point with the existing fleet has now virtually been reached. Unfortunately, there is no evidence of demand becoming stationary.

The earth closet emptyings have continued to decline due to the main sewerage schemes and the conversion of earth closets to water closets served by cesspools.

The refuse collection scheme which gave weekly collections to Bishop's Waltham, Denmead, Shedfield and Wickham with fortnightly collections to the remaining parishes was amended in April to provide a weekly collection in all villages.

The following summary gives particulars of work carried out during the year under review:-

<u>Dustbin</u> <u>Emptyings</u>	<u>Cesspool Emptyings</u>		(1,200 gallons) <u>Cesspool Loads</u>		<u>E.C.</u> <u>Emptyings</u>
	<u>Council</u>	<u>Contract</u>	<u>Council</u>	<u>Contract</u>	
466,383	7,313	250	10,247	320	62,022

Salvage

The following summary shows both the quantity and value of salvageable materials collected during the year:-

	Tons	Cwts	Qtrs	Lbs	£.	s.	d.
Waste Paper	251	13	-	22	1540.	10.	11.
Steel and Iron	2	15	1	20	33.	17.	7.
Mixed Metals	1	9	2	16	53.	8.	9.
Rags and Woollens	4	2	1	2	41.	5.	1.
Bottles	51½ gross				69.	1.	6.
Tyres	65 (in number)				4.	2.	6.

The total receipts were £1,741.16s.5d. a substantial increase on the income for the previous year. Early in the year the waste paper company instituted an advertising campaign and this resulted in a considerable increase in the volume of waste paper received. The quantity of mixed metals collected was greater than that of the previous year.

HOUSING STATISTICS (Public Health) 1965

Inspection of Dwelling-houses during the year:

- (1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) 37
- (b) Number of Inspections made for the purpose .. 189
- (2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 15
- (b) Number of inspections made for the purpose .. 151
- (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 14
- (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be, in all respects, reasonably fit for human habitation -

Remedy of defects during the year without service of formal Notices:

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 1

Action under Statutory Powers during the year:

- (a) Proceedings under Section 9, 10 and 16 of the Housing Act, 1957:-
- (1) Number of dwelling-houses in respect of which
Notices were served requiring repairs Nil.
 - (2) Number of dwelling-houses which were rendered
fit after service of formal notice:
 - (a) By owners Nil.
 - (b) By Local Authority in default of owners. Nil.
- (b) Proceedings under Public Health Acts:-
- (1) Number of dwellings in respect of which
Notices were served requiring default to be
remedied 1.
 - (2) Number of dwelling-houses in which defaults
were remedied after service of formal notice:
 - (a) By owners 6.
 - (b) By Local Authority in default of owners. 4.
- (c) Proceedings under Section 16(4), 17(1) and 24
Housing Act, 1957:-
- (1) Number of dwelling-houses in respect of which
Demolition Orders were made 9.
 - (2) Number of dwelling-houses demolished in
pursuance of Demolition Orders 16.
 - (3) Undertakings given 1.

Overcrowding

Statutory overcrowding does exist in a minor degree within the area, but, under existing circumstances, no direct action is taken; cases are referred to the appropriate Committee for consideration when allocating new houses.

Housing Act, 1949.

Housing Repairs and Rents Act, 1954.

Rent Act, 1957

Rents Act Inspections Nil.
Improvement Grant Inspections 194.

New Houses and Buildings

Comparative figures are given for the years 1957 to 1964:-

Number of plans approved by the Council								
Type of Plan	1957	1958	1959	1960	1961	1962	1963	1964
Houses	119	137	210	149	233	121	197	120
Additions and alterations	49	43	32	77	63	60	55	168
Conversions and adaptations	5	5	9	11	8	18	24	22
Garages	81	87	241	196	238	170	256	170
Bathrooms and drainage Installations	108	71	138	128	112	186	141	240
Farm Buildings	8	5	8	15	8	6	8	17
Sheds and Stores	3	5	7	12	4	15	9	12
Shops, Halls Offices, etc.	4	15	9	14	18	11	19	24

The figures for 1965 are set out below in a slightly more detailed form:-

Dwellings to public sewer	116
" " private sewer	23
" " individual drainage	46
" " existing drainage	1
Additions and alterations	147
Conversions and adaptations	12
Garage and car ports	191
bathroom and drainage installations:	
to public sewer	44
to individual drainage	54
to existing drainage	44
Farm buildings	7
Sheds, Stores, Conservatories etc.	12
Commercial buildings, halls etc.	24

The number of new units of housing erected by private enterprise or provided by the Local Authority over the same period was:-

By whom erected or provided	1957	1958	1959	1960	1961	1962	1963	1964	1965
By private enterprise	115	87	127	151	155	134	103	119	110
By Local Authority	35	27	35	41	13	23	36	71	87

Housing (Financial Provisions) Act, 1958.
House Purchase and Housing Act, 1959
Housing Acts, 1961 and 1964

During the year 38 applications for standard grants in respect of 38 properties were received and the following amenities provided:-

Fixed baths or showers	Wash Basins	Hot water supplies	Water Closets	Food Storage facilities	Grant Paid
21	21	21	20	18	£3,298.

The following tables gives the comparative figures for the number of Discretionary Grant applications and the amount of grants approved for each year:-

Year	No. of Applications Approved	New Units of Housing Provided	No. of houses improved	Owner Occupiers	Tenanted	Total Amounts approved
1952	4	-	7	2	5	£ 508.
1953	2	-	3	-	3	317.
1954	14	-	17	5	12	4225.
1955	48	4	65	23	46	16210.
1956	55	1	60	27	34	16132.
1957	60	2	72	32	42	18623.
1958	33	2	34	18	18	6325.
1959	74	-	82	50	32	18648.
1960	69	2	74	37	39	18960.
1961	59	1	68	40	29	12471.
1962	55	4	64	38	30	16089.
1963	46	1	53	27	27	13579.
1964	48	-	56	24	32	13895.
1965	24	1	23	17	7	7780.
TOTALS:-	591	18	678	340	356	163762.

There are two kinds of grant available to landlords and to owner/occupiers for improving houses erected before 1945:-

- (1) Discretionary Grant: Subject to certain conditions * up to half the estimated cost of a wide range of improvements may be paid, at the discretion of the local Council, subject to a maximum of £350.0s.0d. These grants are available also for the conversion of houses into flats.
- (2) Standard Grant: In some circumstances * house owners and certain leaseholders can obtain, as a right, half the cost, up to a maximum of £155.0s.0d. of providing five basis amenities:-

(a)	bath or shower in a bathroom	£25.
(b)	Wash-hand basin	5.
(c)	Water closet	40.
(d)	Hot water supply	75.
(e)	Food store	10.
		<hr/>
		£155.
		<hr/>

In certain conditions, i.e., cost of drainage installations, new buildings to provide a bathroom, the maximum grant may be increased to £350.0s.0d.

* Further information is contained in a pamphlet entitled "Improve your house with a grant". Copies are available at the Council Offices.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

Under the Milk (Special Designations) Regulations, 1963, all milk sold by retail within the Droxford Rural District must be classified either as Untreated or Pasteurised.

6 Dealers Licences (prepacked milk) were issued during the year.

Meat Inspection

Since the establishment of the Wessex Slaughterhouses Board, all meat inspection for this area is done at the Funtley Abbatoir, Fareham, except the inspection of pigs slaughtered at Knowle Mental Hospital, for consumption on Crown Property. This Slaughterhouse is exempt from licensing.

There remains one Knackers' yard in the district, which is licensed by the Wessex Slaughterhouses Board on receipt of recommendations from this Authority.

Food Adulteration

This section of the Food and Drugs Act, 1955, is operated by the County Council.

Details of the samples taken under the Food and Drugs Act, 1955 during the year ended 31st December, 1965, are as follows:-

Article	Number taken	
	Genuine	Unsatisfactory
1. Milk	109	17
2. Cream	2	-
3. Meat Products	4	1
4. Spirits	20	-
5. Preserves	1	-
6. Fruit, vegetables	5	-
7. Other Foods	5	2
TOTAL:-	146	20

Legal proceedings were taken against a producer/retailer in respect of samples of Channel Islands Milk which contained less than the required standard of 4 % of fat, three Informations being laid in respect of deficiencies up to 8 per cent, calculated on the minimum standard. The investigations carried out in connection with this case indicated that some milk other than of Channel Islands' origin had been used. The defendant was fined a total of £15. and ordered to pay £8.12s.6d. costs.

The remaining discrepancies affecting milk were of relatively minor significance and although they were all fully investigated and brought to the notice of the vendors responsible, legal action was not warranted.

Three "consumer complaints" resulted in legal proceedings being taken in respect of the following:-

A packet of potato crisps which contained a substantial quantity of cotton fibre - the producer was fined £10. and ordered to pay costs of £13.18s.0d.

A bridge roll containing splinters of wood and insect matter - the baker was fined £10. and ordered to pay £11.5s.0d. costs.

A Meat pie seriously contaminated by mould - the retail company who had sold the pie were fined £15. and ordered to pay costs of £3.18s.0d. The condition of the pie appeared to have been caused by prolonged storage.

As the result of a complaint which occurred in the District concerning discolouration of the contents of a tin of Luncheon Meat, samples of the product received from the same manufacturer were taken in another part of the county. The contents of certain of the tins which were submitted for analysis showed varying degrees of discolouration, this clearly having been caused by a breakdown in the interior sealing of the tin surface.

In these particular cases there was no evidence of any harmful contamination; in fact some of the luncheon meat which was subjected to bacteriological examination was found to be sterile, but the discolouration was clearly objectionable and liable to give rise to further complaints. A representative of the company responsible attended a meeting which was held with the Medical Officer for the District and he explained the steps which had been taken by his company to check the effectiveness of the inner seal used on the tins prior to the product being released for consumption. It appeared, however, that fairly prolonged storage had caused some breakdown of this seal. An undertaking was given that no further supplies of the article would be sent out of the factory until this matter had been remedied. In view of this and the relatively innocuous nature of the contamination, it was not considered necessary for further action to be taken. It subsequently became known that the company had corrected the matter by fitting an inner paper liner in the tins of the product in order to prevent the luncheon meat from coming into contact with the metal containers.

General

The usual attention was given to the requirements of the Labelling of Food Order and the Pharmacy and Medicines Act in their application to the labelling and descriptions of food and drugs. Apart from a few minor matters affecting labels, the inquiries made did not call for special comment.

The above information has been obtained through the kindness of Mr. J.S. Preston, the Chief Sampling Officer of the Hampshire County Council.

RODENT CONTROL

Work on this was maintained throughout the year and block control was carried out - no new major infestations were found. The following tables give an analysis of the prevalence and control of rats and mice within the district for the twelve months ending 31st December, 1965:-

	TYPE OF PROPERTY				
	Non-Agricultural				Agricultural
	(1) Local Authority.	(2) Dwelling houses (inc. Council Houses)	(3) All Other (inc. Business premises)	(4) Total of Cols (1), (2) and (3).	
Number of properties in Local Authority's District	24	7007	668	7699	550
Total number of properties inspected as a result of notification	Nil	165	5	170	Nil
Number of such properties found to be infested by:-					
Common rat - Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	165	5	170	Nil
House mouse - Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	3	Nil	3	Nil
Total number of properties inspected in the course of survey under the Act	24	1861	522	2407	169
Number of properties found to be infested by:-					
Common rat - Major	Nil	Nil	Nil	Nil	Nil
Minor	4	449	14	467	3
House mouse - Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
Total number of properties otherwise inspected (e.g. when visited primarily for some other purpose	Nil	Nil	Nil	Nil	Nil

Continued/

	TYPE OF PROPERTY				
	Non-Agricultural				(5) Agricul- tural
	(1) Local Authori- ty	(2) Dwelling Houses (inc. Council Houses)	(3) All Other (inc. Business Premises)	(4) Total of Cols (1),(2) and (3)	
Number of such properties found to be infested by:-					
Common rat - Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
House mouse - Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
Total inspections carried out - including re-inspections	50	2373	584	3007	198
Number of infested properties treated by Local Authority	4	449	14	467	3
Total treatments carried out - including re-treatments	32	562	78	672	NIL
Number of notices served under Sec. 4 of the Act					
(a) Treatment	Nil	Nil	Nil	Nil	Nil
(b) Structural work (i.e. Proofing)	Nil	Nil	Nil	Nil	Nil
Number of cases in which default action was taken following the issue of a notice under Section 4 of the Act	Nil	Nil	Nil	Nil	Nil
Legal Proceedings	Nil	Nil	Nil	Nil	Nil
Number of "Block" control schemes carried out	Nil				

SUMMARY OF INSPECTIONS MADE
AND NOTICES SERVED

BUILDING INSPECTIONS

Foundations	213
Concrete oversite	137
Damp Proof Courses	137
Intermediate	854
Drains Tested	409
Final Inspections	287
Building Inquiries Inspections	104
Short Lived Materials Section 53	1
Council House Inspections (by Public Health Inspector)	12
Town Planning Inspections	2
Sewer connections	7

PUBLIC HEALTH ACT, 1936

Drains and Sewer Ditches controlled by the Council	45
Blocked and Insanitary Drains and Cesspools	266
Defective and Insanitary Closet Accommodation	0
Dangerous Buildings	0
Refuse Tips	8
Filthy and Verminous Premises	10
Verminous/Insanitary persons	3
Disinfestations	13
Nuisances (other than houses) Section 92	11
Re-inspections for the purpose	5
Water Supply	96
Infectious Diseases (Visits)	75
Disinfections	1
Moveable dwellings, Section 269	0
Other Inspections	128

FOOD AND DRUGS ACT, 1955

Carcases Inspected	66
Inspections, other foods	25
Food Premises, Section 13	40
Milk Distribution	0

FACTORIES ACT, 1937

Power Factories	1
Non-Power Factories	0
Outworkers	0
Offices, Shops and Railway Premises	86

PETROLEUM REGULATIONS

Inspections	16
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MISCELLANEOUS

Rodent Control (by Public Health Inspector)	13
Housing Applications	13
Other Visits	263
Caravan Inspections	26
Noise Abatement	3
Animal Boarding Establishments	3
Exhumation Inspections	1
Scrap Metal Act	1

SAMPLES TAKEN

Water	20
Milk	19
Other Samples	6
Ice Cream	0

FACTORIES ACT, 1961

Part 1 of the Act

1. Inspections for the purpose as to health

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2,3,4 and 6 are to be enforced by Local Authorities	3	-	-	-
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	69	1	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Author- ity, (excluding out-workers' premises)	-	-	-	-
Totals:-	72	1	-	-

2. Cases in which defects were found

There were no cases in which defects were found for the year 1965.

DISTRIBUTION

County and District Councillors

Parish Councils

Family Doctors

Primary and Secondary Schools

Branch Libraries

County Medical Officer

Adjacent Medical Officers of Health

Public Health Laboratories

District Nurses and Health Visitors

Ministries of Agriculture, Health, Housing

Director of Statistics

Welfare Officer

Children's Officer

Mental Welfare Officer

Chief Sampling Officer

Factory Inspector

